

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 The National Republican Trust PAC

ADDRESS (number and street) 2100 M Street, NW, Suite 170-340 Washington DC 20037

2. FEC IDENTIFICATION NUMBER C C00455378 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 06/01/2014 through 06/30/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Scott Wheeler

Signature of Treasurer Scott Wheeler [Electronically Filed] Date 07/17/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The National Republican Trust PAC

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="4632.12"/>	<input type="text" value="4632.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1324.79"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="15202.28"/>	<input type="text" value="76847.41"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="16527.07"/>	<input type="text" value="81479.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10032.49"/>	<input type="text" value="74984.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6494.58"/>	<input type="text" value="6494.58"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="34710.34"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**The National Republican Trust PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1335.00	16502.95
(ii) Unitemized .....	8816.28	36318.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10151.28	52821.09
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10151.28	52821.09
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	50.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	5051.00	23976.32
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	15202.28	76847.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15202.28	76847.41

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6797.53	50218.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6797.53	50218.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	550.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	3234.96	24216.89
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10032.49	74984.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10032.49	74984.95

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10151.28	52821.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10151.28	52821.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6797.53	50218.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	50.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6797.53	50168.06

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)  
**A. Anthony J Arjil**

Mailing Address 880 Cumorah Court

City Placerville State CA Zip Code 95667

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : 40716.C221189**

Amount of Each Receipt this Period  
**35.00**

Receipt

Full Name (Last, First, Middle Initial)  
**B. William Bruzzone**

Mailing Address 39 Brookdale Ct

City Lafayette State CA Zip Code 94549

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : 40716.C221296**

Amount of Each Receipt this Period  
**500.00**

Receipt

Full Name (Last, First, Middle Initial)  
**c. John E Campbell**

Mailing Address 300 Letterman Rd

City Knoxville State TN Zip Code 37919-6328

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Finance

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 40716.C221295**

Amount of Each Receipt this Period  
**300.00**

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **835.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)  
**A. Frank G Eathorne Jr**

Mailing Address 2661 State Highway 59

City Douglas	State WY	Zip Code 82633
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 22 / 2014**  
**Transaction ID : 40716.C221270**

Amount of Each Receipt this Period  
**100.00**

Receipt

Full Name (Last, First, Middle Initial)  
**B. Shirley J Martin**

Mailing Address 1373 Flanagan Drive

City Christiansburg	State VA	Zip Code 24073
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2014**  
**Transaction ID : 40716.C221088**

Amount of Each Receipt this Period  
**25.00**

Receipt

Full Name (Last, First, Middle Initial)  
**C. Diane C Moore**

Mailing Address 305 Monarch Cove

City Cedar Park	State TX	Zip Code 78613
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Moore & Assoc.
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 03 / 2014**  
**Transaction ID : 40716.C221107**

Amount of Each Receipt this Period  
**25.00**

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)  
**A. Diane C Moore**

Mailing Address 305 Monarch Cove

City State Zip Code  
 Cedar Park TX 78613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Self Employed Moore & Assoc.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 345.00

Date of Receipt  
 06 / 12 / 2014  
**Transaction ID : 40716.C221108**

Amount of Each Receipt this Period  
 25.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Diane C Moore**

Mailing Address 305 Monarch Cove

City State Zip Code  
 Cedar Park TX 78613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Self Employed Moore & Assoc.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 370.00

Date of Receipt  
 06 / 26 / 2014  
**Transaction ID : 40716.C221109**

Amount of Each Receipt this Period  
 25.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Martin J Pierret**

Mailing Address 9592 Snake River Road

City State Zip Code  
 Pasco WA 99301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Self Employed Farmer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 06 / 03 / 2014  
**Transaction ID : 40716.C221067**

Amount of Each Receipt this Period  
 25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)  
**A. Martin J Pierret**

Mailing Address 9592 Snake River Road

City Pasco	State WA	Zip Code 99301
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Farmer
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2014

**Transaction ID : 40716.C221068**

Amount of Each Receipt this Period  

25.00
-------

Receipt

Full Name (Last, First, Middle Initial)  
**B. Elaine K Portier**

Mailing Address 15770 SW Towhee Ln

City Beaverton	State OR	Zip Code 97007
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FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker	Occupation Homemaker
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **422.95**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2014

**Transaction ID : 40716.C221070**

Amount of Each Receipt this Period  

25.00
-------

Receipt

Full Name (Last, First, Middle Initial)  
**C. Elaine K Portier**

Mailing Address 15770 SW Towhee Ln

City Beaverton	State OR	Zip Code 97007
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FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker	Occupation Homemaker
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **447.95**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2014

**Transaction ID : 40716.C221071**

Amount of Each Receipt this Period  

25.00
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Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>75.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

**A. Elaine K Portier**  
Full Name (Last, First, Middle Initial)

Mailing Address 15770 SW Towhee Ln

City Beaverton State OR Zip Code 97007

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **472.95**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : 40716.C221072**

Amount of Each Receipt this Period  
**25.00**

Receipt

**B. Robert W Schmucker**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O.Box 1406

City Hawkinsville State GA Zip Code 31036

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 40716.C221370**

Amount of Each Receipt this Period  
**25.00**

Receipt

**C. George Shelton**  
Full Name (Last, First, Middle Initial)

Mailing Address 4124 Kingsferry Dr

City Arlington State TX Zip Code 86016

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 14 / 2014**

**Transaction ID : 40716.C221269**

Amount of Each Receipt this Period  
**100.00**

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **150.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 26  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Brian S Teepe**

Mailing Address 8919 Evening Grove Cv

City Cordova State TN Zip Code 38018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fedex Financial Analyst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 13 / 2014  
**Transaction ID : 40716.C221205**

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1335.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)  
**A. Leonard C Hartka**

Mailing Address 7635 E New Battle Grove Rd

City Dundalk	State MD	Zip Code 21222-
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FEC ID number of contributing federal political committee. **C**

Name of Employer Sun Automatrn Group	Occupation ERP Analyst
-----------------------------------------	---------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : 40716.C221280**

Amount of Each Receipt this Period  
100.00

Other Receipt

Note: Non-Cont Account

Full Name (Last, First, Middle Initial)  
**B. Leonard C Hartka**

Mailing Address 7635 E New Battle Grove Rd

City Dundalk	State MD	Zip Code 21222-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Sun Automatrn Group	Occupation ERP Analyst
-----------------------------------------	---------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2014

**Transaction ID : 40716.C221281**

Amount of Each Receipt this Period  
100.00

Other Receipt

Note: Non-Cont Account

Full Name (Last, First, Middle Initial)  
**C. Stanley Schmidt**

Mailing Address PO Box 137  
605 SW Church St

City Dallas	State OR	Zip Code 97338-
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation State Farm Agent
--------------------------	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2014

**Transaction ID : 40716.C221287**

Amount of Each Receipt this Period  
100.00

Other Receipt

Note: Non-Cont Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial) <b>A. Stanley Schmidt</b>		Date of Receipt MM / DD / YYYY 06 / 19 / 2014 <b>Transaction ID : 40716.C221288</b>
Mailing Address PO Box 137 605 SW Church St		Amount of Each Receipt this Period 100.00
City Dallas	State OR	Zip Code 97338-
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation State Farm Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Other Receipt Note: Non-Cont Account

Full Name (Last, First, Middle Initial) <b>B. Allen H Simon</b>		Date of Receipt MM / DD / YYYY 06 / 12 / 2014 <b>Transaction ID : 40716.C221292</b>
Mailing Address 1383 N Criss St		Amount of Each Receipt this Period 250.00
City Chandler	State AZ	Zip Code 85226-
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Other Receipt Note: Non-Cont Account

Full Name (Last, First, Middle Initial) <b>C. Allen H Simon</b>		Date of Receipt MM / DD / YYYY 06 / 21 / 2014 <b>Transaction ID : 40716.C221293</b>
Mailing Address 1383 N Criss St		Amount of Each Receipt this Period 500.00
City Chandler	State AZ	Zip Code 85226-
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	Other Receipt Note: Non-Cont Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input checked="" type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

**A. Jeffery Spragens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7426 Fisher Island Dr  
 City Miami Beach State FL Zip Code 33109-0765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SafeStitch Medical Occupation CEO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : 40716.C221294**  
 Amount of Each Receipt this Period  
 250.00  
 Other Receipt  
 Note: Non-Cont Account

**B. Carl E Swenlin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 7340  
 City Goleta State CA Zip Code 93117-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Decision Point Occupation Internet Publisher  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : 40715.C220937**  
 Amount of Each Receipt this Period  
 50.00  
 Other Receipt  
 Note: Non-Cont Account

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1450.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Media Group, LLC**

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement  
PAC Management Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2014

**Transaction ID : 40613.E3759**

Amount of Each Disbursement this Period

400.00

PAC MANAGEMENT CONSULTING

Full Name (Last, First, Middle Initial)

**B. Capitol Media Group, LLC**

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement  
PAC Management Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 18 / 2014

**Transaction ID : 40715.E3797**

Amount of Each Disbursement this Period

1700.00

PAC MANAGEMENT CONSULTING

Full Name (Last, First, Middle Initial)

**C. Capitol Media Group, LLC**

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement  
PAC Management Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : 40715.E3761**

Amount of Each Disbursement this Period

2200.00

PAC MANAGEMENT CONSULTING

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4300.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial) <b>A. Capitol Media Group, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 344 Maple Ave West #375		<b>Transaction ID : 40715.E3763</b>
City Vienna State VA Zip Code 22180-	Amount of Each Disbursement this Period 400.00	
Purpose of Disbursement PAC Management Consulting	Candidate Name	PAC MANAGEMENT CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 1601 Trapelo Road, Suite 329		<b>Transaction ID : 40715.E3784</b>
City Waltham State MA Zip Code 02451-	Amount of Each Disbursement this Period 295.00	
Purpose of Disbursement PAC Email Service	Candidate Name	PAC EMAIL SERVICE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. Data Validation, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 75 5th St NW Ste 221		<b>Transaction ID : 40715.E3782</b>
City Atlanta State GA Zip Code 30308-	Amount of Each Disbursement this Period 250.01	
Purpose of Disbursement PAC Email Service	Candidate Name	PAC EMAIL SERVICE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	945.01
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)

**A. Maelstrom Technologies Solutions**

Mailing Address 200 S. Executive Drive, Suite 101

City Brookfield State WI Zip Code 53005-

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

Transaction ID : 40715.E3801

Amount of Each Disbursement this Period

398.43

PAC CREDIT CARD PROCESSING

Full Name (Last, First, Middle Initial)

**B. Mailchimp**

Mailing Address 512 Means St Suite 404

City Atlanta State GA Zip Code 30318-

Purpose of Disbursement  
PAC Email Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2014

Transaction ID : 40715.E3777

Amount of Each Disbursement this Period

240.00

PAC EMAIL SERVICE

Full Name (Last, First, Middle Initial)

**C. Mailchimp**

Mailing Address 512 Means St Suite 404

City Atlanta State GA Zip Code 30318-

Purpose of Disbursement  
PAC Email Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2014

Transaction ID : 40715.E3783

Amount of Each Disbursement this Period

150.00

PAC EMAIL SERVICE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

788.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)

**A. Parrot Video Services**

Mailing Address 33161 Camino Capistrano

City San Juan Capistran State CA Zip Code 92675-

Purpose of Disbursement  
PAC Video Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2014

Transaction ID : 40715.E3779

Amount of Each Disbursement this Period

150.00

PAC VIDEO PRODUCTION

Full Name (Last, First, Middle Initial)

**B. Parrot Video Services**

Mailing Address 33161 Camino Capistrano

City San Juan Capistran State CA Zip Code 92675-

Purpose of Disbursement  
PAC Video Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 20 / 2014

Transaction ID : 40715.E3788

Amount of Each Disbursement this Period

150.00

PAC VIDEO PRODUCTION

Full Name (Last, First, Middle Initial)

**C. United States Postal Service**

Mailing Address 475 LEnfant Plaza SW

City Washington State DC Zip Code 20260-

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2014

Transaction ID : 40715.E3780

Amount of Each Disbursement this Period

55.55

PAC POSTAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

355.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address 475 LEnfant Plaza SW

City Washington State DC Zip Code 20260-

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 16 / 2014

**Transaction ID : 40715.E3785**

Amount of Each Disbursement this Period

80.80

PAC POSTAGE

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 475 LEnfant Plaza SW

City Washington State DC Zip Code 20260-

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2014

**Transaction ID : 40715.E3789**

Amount of Each Disbursement this Period

75.75

PAC POSTAGE

Full Name (Last, First, Middle Initial)

**C. United States Postal Service**

Mailing Address 475 LEnfant Plaza SW

City Washington State DC Zip Code 20260-

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2014

**Transaction ID : 40715.E3791**

Amount of Each Disbursement this Period

55.55

PAC POSTAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

212.10

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)

**A. Virgin Mobile USA**

Mailing Address 10 Independence Blvd.

City Warren State NJ Zip Code 07059-

Purpose of Disbursement  
PAC Phone Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

**Transaction ID : 40715.E3790**

Amount of Each Disbursement this Period

61.60

PAC PHONE EXPENSE

Full Name (Last, First, Middle Initial)

**B. Virgin Mobile USA**

Mailing Address 10 Independence Blvd.

City Warren State NJ Zip Code 07059-

Purpose of Disbursement  
PAC Phone Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : 40715.E3792**

Amount of Each Disbursement this Period

39.20

PAC PHONE EXPENSE

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

100.80

6701.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Media Group, LLC**

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement  
NON-CONT PAC MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
06 / 25 / 2014

**Transaction ID : 40715.E3762**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Capitol Media Group, LLC**

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement  
NON-CONT PAC MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
06 / 06 / 2014

**Transaction ID : 40611.E3745**

Amount of Each Disbursement this Period

425.00

Full Name (Last, First, Middle Initial)

**C. Capitol Media Group, LLC**

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement  
NON-CONT PAC MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
06 / 18 / 2014

**Transaction ID : 40715.E3798**

Amount of Each Disbursement this Period

1200.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2625.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Media Group, LLC**

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement  
NON-CONT PAC MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
06 / 27 / 2014

**Transaction ID : 40715.E3764**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**B. Maelstrom Technologies Solutions**

Mailing Address 200 S. Executive Drive, Suite 101

City Brookfield State WI Zip Code 53005-

Purpose of Disbursement  
NON-CONT PAC CREDIT CARD PROCESSING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
06 / 30 / 2014

**Transaction ID : 40715.E3802**

Amount of Each Disbursement this Period

151.69

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

551.69

**TOTAL** This Period (last page this line number only)..... ▶

3176.69

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Maelstrom Technologies Solutions</b>	Nature of Debt (Purpose): PAC Web Hosting/Services
Mailing Address 200 S. Executive Drive, Suite 101	
City State Zip Code Brookfield WI 53005-	

Outstanding Balance Beginning This Period 2220.00	<b>Transaction ID : LS40616.E3760</b>	
Amount Incurred This Period 50.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2270.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Koch &amp; Hoos, LLC</b>	Nature of Debt (Purpose): PAC Accounting Consulting
Mailing Address P.O. Box 1154	
City State Zip Code Alexandria VA 22313-	

Outstanding Balance Beginning This Period 9301.21	<b>Transaction ID : LS40715.E3769</b>	
Amount Incurred This Period 3965.45	Payment This Period 0.00	Outstanding Balance at Close of This Period 13266.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Capitol Media Group, LLC</b>	Nature of Debt (Purpose): PAC Management Consulting
Mailing Address 344 Maple Ave West #375	
City State Zip Code Vienna VA 22180-	

Outstanding Balance Beginning This Period 4033.53	<b>Transaction ID : LS40715.E3770</b>	
Amount Incurred This Period 5824.70	Payment This Period 7725.00	Outstanding Balance at Close of This Period 2133.23

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	17669.89
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Spectrum Communications</b>	Nature of Debt (Purpose): PAC Telephone Expense
Mailing Address 125 N Executive Dr, Ste. 300	
City State Zip Code Brookfield WI 53005-	

Outstanding Balance Beginning This Period <input type="text" value="750.15"/>	<b>Transaction ID : LS31122.E3455</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="750.15"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CRC Public Relations</b>	Nature of Debt (Purpose): PAC Press Releases
Mailing Address 2760 Eisenhower Ave, 4th Floor	
City State Zip Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period <input type="text" value="1461.50"/>	<b>Transaction ID : LS00518.E1539</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1461.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Oleg Atbashian</b>	Nature of Debt (Purpose): PAC Website Maint/Services
Mailing Address 275 116th Ave #101	
City State Zip Code Saint Petersburg FL 33706-	

Outstanding Balance Beginning This Period <input type="text" value="510.00"/>	<b>Transaction ID : LS30905.E3317</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="510.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="2721.65"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PR Newswire</b>	Nature of Debt (Purpose): PAC Press Releases
Mailing Address G.P.O. Box 5897	
City State Zip Code New York NY 10087-5897	

Outstanding Balance Beginning This Period <input type="text" value="1722.50"/>	<b>Transaction ID : LS10609.E2211</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1722.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Diener Consultants, Inc.</b>	Nature of Debt (Purpose): PAC Email Communications
Mailing Address 1002 Lititz Pike # 237	
City State Zip Code Lititz PA 17543-9328	

Outstanding Balance Beginning This Period <input type="text" value="8000.00"/>	<b>Transaction ID : LS10419.E2174</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DB Capitol Strategies PLLC</b>	Nature of Debt (Purpose): PAC Legal Fees
Mailing Address 717 King St, Ste 300	
City State Zip Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period <input type="text" value="2000.00"/>	<b>Transaction ID : LS31016.E3418</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2000.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="11722.50"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**The National Republican Trust PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Political Insider, LLC</b>	Nature of Debt (Purpose): IE Email Communication
Mailing Address P.O. Box 25574	
City State Zip Code Alexandria VA 22313-5574	

Outstanding Balance Beginning This Period <input type="text" value="520.00"/>	<b>Transaction ID : LS20523.E2645</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="520.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Diener Consultants, Inc.</b>	Nature of Debt (Purpose): IE Email Communication
Mailing Address 10940 S Parker Rd, Ste. 763	
City State Zip Code Parker CO 80134-7440	

Outstanding Balance Beginning This Period <input type="text" value="719.50"/>	<b>Transaction ID : LS20618.E2681</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="719.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LexisNexis</b>	Nature of Debt (Purpose): PAC Subscription
Mailing Address P.O. Box 7247-7090	
City State Zip Code Philadelphia PA 19170-	

Outstanding Balance Beginning This Period <input type="text" value="1356.80"/>	<b>Transaction ID : LS30807.E3300</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1356.80"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="2596.30"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="34710.34"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="34710.34"/>